FCC 702 INSTRUCTIONS

APPLICATION FOR CONSENT TO ASSIGNMENT OF RADIO STATION CONSTRUCTION AUTHORIZATION OR LICENSE (For Stations in Services Other Than Broadcast)

FCC 702 is to be used when applying for consent to assignment of radio facilities governed by 47 CFR Parts 21, 23, 25 or 101. FCC 702 consists of two Sections: Section I is the Fee Portion and Section II is the Application Portion.

Instructions for Completing Section I (Fee Portion)

Part I must be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Part II. Please type or print legibly. All required blocks must be completed or application/filing may be returned without action.

- 1. Applicant Name If an individual, enter Last, First, Middle Initial. If a company, enter name which is used commercially.
- 2. Mailing Address Enter the Street Address or P. O. Box Number, City, State or ZIP Code to which the applicant wishes correspondence to be sent. If a foreign address, enter Country in lieu of the two-digit state abbreviation as prescribed by the U.S. Postal Service.
- 3. Call Sign or Other FCC Identifier Enter an applicable call sign or unique FCC identifier. If applying for service affecting more than one call sign, enter only one call sign.
- 4. Taxpayer Identification Number The FCC is required to collect this number in order to comply with the Debt Collection Improvement Act of 1996. For an individual, this number is your Social Security Number. For other than an individual, enter your Employer Identification Number.
- 5. Internet or E-Mail Address If one is available, enter an Internet or E-Mail address where the Commission could send questions or correspondence concerning your application.
- Column (A) Enter the correct Fee Type Code for the action you are requesting. These codes are listed in the Wireless Telecommunications Bureau Fee Filing Guide or you may call 1-888-225-5322 for assistance.

Column (B) - Enter a fee multiple, if any. Your submission may request action with respect to more than one station, license, frequency or party and can be submitted together with one check if they meet specific conditions. This column is used only if a multiple, i.e., two or more, is being applied for.

Column (C) - Multiply the amount of the fee associated with the Fee Type Code in Column (A) times the Fee Multiple in Column (B). Enter the result in Column (C).

7. Total Amount Remitted - Enter the total of lines (1) through (5) of Column (C). Your remittance should equal this amount.

How to Submit Applications

An original and one copy of completed application must be submitted. Required copies of applications should be clearly identified as "duplicate copy" and placed behind the original package. A copy of an application submitted for receipt purposes only should be placed at the top of the submission. Extraneous material and extra copies should be avoided at all times. Failure to abide by these instructions will delay the processing of your submission or may result in the return of your application without action.

Mailing Instructions

Completed applications should be mailed to the proper address as shown in the Wireless Telecommunications Bureau Fee Filing Guide. Applications which are properly addressed to the appropriate P. O. Box Number may also be hand delivered to the following address: Federal Communications Commission, c/o Mellon Bank, Three Mellon Bank Center, 525 William Penn Way, 27th Floor, Room 153-2713, Pittsburgh, PA (Attn: Wholesale Lockbox Shift Supervisor).

Applications received before midnight on a normal business day will receive that day's date as the receipt date. Deliveries made after midnight on Fridays will not be "officially" receipted until the following Monday. Applications received on weekends and government holidays are dated the next regular business day.

The methods of payments accepted by the Commission are listed in the front of the Wireless Telecommunications Bureau Fee Filing Guide or you may call 1-888-225-5322 for further assistance.

General Instructions for Completing Section II (Application Portion)

- 1. Before the application portion is prepared, the applicant should refer to the applicable rules and regulations of the Commission which govern the radio facility (Title 47 CFR Parts 1, 21, 23, 25 or 101), copies of which may be purchased from the Superintendent of Documents. Call (202) 512-1800 for the current prices.
- 2. 47 CFR Parts 21, 23, 25 or 101 may require information to be filed with the application in addition to that specified in the application form. Applicants should make every effort to file a complete application in compliance with the Rules. Failure to do so can result in rejection or return of the application or a delay in the processing of the application. The Commission may require the furnishing of additional information as it deems necessary in the consideration of the application.
- 3. One submission may be filed to request assignment of a group of station licenses provided specific requirements are met (see 47 CFR Parts 21, 23, 25 or 101 for details).
- 4. Number each document or statement required to be filed as an Exhibit consecutively. Enter the numbers in the space provided in the items of the form.
- 5. Approval of this application is not to be construed as a modification of outstanding authorization.

NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1995

We have estimated that each response to this collection of information will take on average 5 hours. Our estimate includes the time to read instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Washington, DC 20554, Paperwork Reduction Project (3060-0068). We will also accept your comments via the Internet if you send them to jboley@fcc.gov. Please DO NOT SEND COMPLETED APPLICATION FORMS TO THIS ADDRESS.

You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0068.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the federal government, the Taxpayer Identification Number (such as your Social Security Number) and other information you provide may also be disclosed to the Department of Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e)(3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.

Federal Communications Commission Washington, DC 20554

FCC 702

Approved by OMB 3060-0068 Est. Avg. Burden Per Response: 5 Hours

FOR FCC	
FOR FCC USE ONLY	

APPLICATION FOR CONSENT TO ASSIGNMENT OF RADIO STATION CONSTRUCTION **AUTHORIZATION OR LICENSE (For Stations in Services Other Than Broadcast)**

SECTION I (FEE PORTIC PART I	<u> </u>				
Applicant Name (Last, Fi	rst, Middle Initial)				
Mailing Address (Street o	or P. O. Box)				
			170 O. d.		
City		State or Country (if foreign address)	ZiP Code		
Call Sign or Other FCC Id	lentifier	Taxpayer Identification Number	Taxpayer Identification Number		
Internet or E-Mail Addres	S				
in the Wireless Telec Enter in Column (C) entered in Column (I	ommunications Bureau Fee Filing the result obtained by multiplying B), if any.	service you are applying for. Fee Ty Guide. Enter in Column (B) the Fe the value of the Fee Type Code in C (C)	e Multiple, if applicable.		
(A) FEE TYPE CODE	(B) FEE MULTIPLE (if required)	FEE DUE	FOR FCC USE ONLY		
1)		\$			
(A) FEE TYPE CODE	(B) FEE MULTIPLE (if required)	(C) FEE DUE	FOR FCC USE ONLY		
2)		\$			
			FOR FCC USE ONLY		
)		\$			
			FOR FCC USE ONLY		
4)		\$			
			FOR FCC USE ONLY		
5)		\$			
THROUGH (5), AND ENT	OWN IN COLUMN (C), LINES (1) ER THE TOTAL HERE. THIS AMOUNT	TOTAL AMOUNT REMITTED	FOR FCC USE ONLY		
SHOULD EQUAL YOUR ENC	LOSED REMITTANCE.	> \$			

SECTION II (APPLICATION PORTION		FOR FCC USE ONLY				
OLUMON II (AF				File No. and Call Sign		
Section II contains	two parts:	INSTRU	CTIONS			
PART 1 is to be co and operation of legal disability, ba	empleted by assignor (the pre station is to be assigned by inkruptcy, or other legal proce	voluntary ac eedings.	ct, as by contro	act or other agreen	nent, or by involu	untary act such as death,
as a result of volu- authorization or lice	mpleted by assignee who wi untary act (contract or othe censee, or by involuntary assi or by operation of law in any	r agreemer ignment of 1	it), or involunta the physical pr	iry act (death or le	egal disability) o	f grantee of construction
Applicant is advicensummation (se	ised that if the Commission se appropriate Rulepart for sp	consents to pecific requi	o request for rements).	assignment, the C	ommission must	be notified by letter of
PART I - To Be	Completed By Assignor					
1. Name of Assig	nor					
Mailing Addres	ss (Street or P. O. Box, City, Sta	te and ZIP C	ode)		-	
2. Name of Assign	nee					
Mailing Addres	ss (Street or P. O. Box, City, Sta	ite and ZIP C	ode)			
3. Provide the foll	owing information for the facil	lities authori	zed to assignor	for which assignme	ent is sought in th	is application.
a. Call Sign	b. File Number	c. Loco	ition	d. Expiration Date	e. No. of Stations	f. Service
			.			
		·		المحادة	in itana 3) in uuhi	b assignment is sought
4. Provide below (a) call sign; (b) fi	the following information for ile numbers; and (c) date by t	incomplete which consti	or unconstruct ruction must be	completed.	in item 3) in whic	;n assignment is sought.
Commission's cor	N: The undersigned represernsent has been received; that pplication; and that all stater and belief.	t all the atta	ched exhibits o	are a material part l	nereof and are in	ncorporated herein as if set
I request that the	Commission grant its written	consent to t	he foregoing a	ssignment.		
18, SECTION 10	TATEMENTS MADE ON THIS 01) AND/OR REVOCATION . CODE, TITLE 47, SECTION	N OF ANY	ION ARE PUN AUTHORIZATION	ISHABLE BY FINE ON (U.S. CODE, 1	AND IMPRISON	MENT (U.S. CODE, TITLE DN 312(a)(1)), AND/OR
Typed Name of Person Signing			Mailing Addres	s (Street or P. O. Bo	c, City, State and	ZIP Code)
	rized Officer or Agent (if signer of attorney or other authority				Date Date	

6. Name of Assignee (If a corporation, state corporate name; if the partnership does business; if an unincorporated association and the name of the association. The same name or names stexcept that in the case of a partnership, the application may be	n, state the name of an executive officer, the offic hould be signed in the place provided at the end	e hel of the	d by hi e applic	m/her,
Mailing Address (Street or P. O. Box, City, State and ZIP Code)				
7(a). Is this application made for consent to voluntary or involun VOLUNTARY INVOLUNTAR	tary assignment of permit or license? LY (Complete items 7(b) and 7(c)).			
(b) Name of Present Licensee and Call Sign	(c) Attach as Exhibit a copy of court order instrument by which assignee has obtained the lest or control the use and operation of station as a react of assignor.	gal ri	ght to c	ontruct
8. State whether assignees is: INDIVIDUAL PARTNERSHIP	CORPORATION	AS	SOCIAT	ION
9. Attach as Exhibit a statement of assignee's principal b	ousiness.			
10. Attach as Exhibit a statement of any other business(e corporation, explain in statement other business(es) the office interested in.	os) applicant is directly or indirectly interested in. If a ers, directors, or principal stockholders are directly o	pplic r indir	ant is a ectly	<u>. </u>
	LACE AN 'X' IN THE APPROPRIATE COLUMN.		YES	NO
11. Is individual assignee, or if partnership, each member of partnership.	nership a citizen of the United States?	>		
12. Is assignee or any party to this application a representative o	f an alien or of a foreign government?	¥		
13(a) Has the assignee been finally adjudged guilty by a Federal to monopolize, radio communication directly or indirectly the apparatus, exclusive traffic arrangements, or any other medium.	hrough control of manufacture or sale of radio	\		
(b) Has the assignee, or any party to this application, or any per ever been convicted of a crime for which the penalty import of six months or more? If "YES", attach as Exhibit as	osed was a fine of \$500 or more, or an imprisonment	>		
(c) Is assignee directly or indirectly controlled by any party find	ally adjudged guilty as above stated?	>		
14(a) Is assignee directly or indirectly, through stock ownership, or have control of any other radio stations? If "YES", in Exhib stations.	contract, or otherwise, interested in the ownership it, give call letters and location of such	*		
(b) Has the assignee in the past fitteen years been directly or in of any radio stations other than those referred to under (a)? stations and exact names of licensees.	ndirectly interested in the ownership or control If "YES", in Exhibit, give classes of	¥		
15. If assignment involves any Multipoint Distribution Service (MD indirectly interested in or affiliated with, or has leasing arrang submit as Exhibit a description of the relationship and franchise area and MDS station's protected service area, if a	pements with a cable television company? If "YES", if a map showing overlap of boundaries of cable	\		
 16. If assignment involves any authorizations for Part 21 or Part 11 applicants must also complete (c). (a) Does authorization involve facilities that have not been confit "YES", does assignee represent that it has, or has reasoned the expected cost of constructing any such facilities within operating expenses for twelve months? 	nstructed? able assurance that it will have, the ability to meet	\		
(b) Were facilities authorized following a comparative hearing involve facilities that have not been constructed; or involve selection proceeding in which the successful applicant refor less than one year?	e facilities that were authorized following a random	\		
(c) Does assignee acknowledge that, if Commission consents date of consent and Commission must be notified by assig	, assignment must be completed within 45 days of inee in writing within 10 days of consummation?	\		
17. If assignee is a corporation or association, answer the follow				
(a) Under laws of what State or Country is it organized?				ļ
(b) Attach as Exhibit a certified copy of the Articles of Commission. If previously filed, state date and FCC Divisio	Incorporation if not heretofore filed with the			
(c) Is more than one-fifth of capital stock owned of record or or by a foreign government or representatives thereof, or the foreign country?	may it be voted by aliens or their representatives	>		
(d) Is any director or officer an alien? If "YES", list in Exhibit	the names and position of each.	>		

PART II - To Be Completed By Assignee

PART II - To Be Completed By Assignee (continued)	<u> </u>			
17. (continued) In Exhibit, give the names and addresses of all stock of assignee's stock and percentage of stock held by each.	holders owning and/or votu	ng 10% or more		
	PLACE AN 'X' IN THE APPRO	PRIATE COLUMN.	YES	NO
18(a) Is assignee directly or indirectly controlled by any other controlling corporation.	orporation? If "YES", in Exhib	it, give name	>	
(b) Under the laws of what State or Country is the controlling of	corporation organized? ➤			
(c) Is more than one-fourth of capital stock of such corporati their representatives, or by a foreign government or repre under the laws of a foreign country?	it be voted by aliens, orporation organized	>		
(d) Is any director or officer of the controlling corporation an position of each.			>	
(e) Is the above described controlling corporate in turn a sub- answering questions 18(a) to 18(e), inclusive, for each co- having final control.	osidiary? It "YES", attach add reporation to and including t	ditional sheets he organization	>	
19. If applicant is an unincorporated association, answer 19(a)				
(a) In Exhibit, describe purpose of association and p				
(b) Attach as Exhibit a certified copy of the Articles of Commission. If previously filed, state date and FCC Division.	ion: ➤			
(c) Are any members aliens? If "YES", in Exhibit, give			>	
20(a) Is assignee personally familiar with the Commission's rules governing the service which are the subject of this application?				
(b) Has assignee examined the subject facilities and determ compliance with current authorizations and the Commissi	ined that construction and a on's rules?	operation is in	≻	
21(a) State assignee's relation to assignor, station or license: Pro Forma Assignment Manager Lessee Financier Other	(b) Identify ultimate paren give names and addre	t corporation, if assignee is asses of controlling individu	a subsidiary ials.	and a
(c) Attach as Exhibit a copy of the agreement showing the previously filed, state date and FCC Division: > (d) Attach as Exhibit a statement of the nature of assets.				Θ,
or if this is not a pro forma assignment.				
· · · · · · · · · · · · · · · · · · ·	vhich may affect assignee's	right to do so.	NO	
23. Attach as Exhibit a statement showing assignee's figure operation of station.				
24. Attach as Exhibit a statement indicating whether sto operate station.				
 Attach as Exhibit a statement explaining how the c convenience, interest, or necessity. 				
26. The assignor's most recent applications for authorization a statements therein contained is hereby reaffirmed by the a and in the following particulars:	re to be considered as part : issignee, except insofar as t	of this application, and the he contrary expressly app	truth of the ears herein,	
27. CERTIFICATION: The applicant waives any claim to the against the regulatory power of the United States because requests that written consent be granted to assign the authobligations and agrees to abide by all the conditions impose shall not be liable for any act done by, or any right accrued to said assignment. Neither the applicant nor any other party FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse or distribution of a controlled substance.	of the previous use of the norizations herein mentione ed upon the assignor under or any suit or proceeding her to the application is subject Act of 1988, 21 U.S.C. Section	same, whether by licensed to him(her). The assign the subject authorization ad or commenced against to a denial of Federal beam 862, because of a convinced to the control of the control	e or otherwis see assumes except that st, the assign enefits that in iction for pos	e, and all the he/she or prior ncludes
I certify that the statements made in PART II are true, complete	e, and correct to the best o	f my knowledge and belie	f.	
WILLFUL FALSE STATEMENTS MADE ON THIS APPLICATION ARE PU AND/OR REVOCATION OF ANY AUTHORIZATION (U.S. CODE, SECTION 503).	JNISHABLE BY FINE AND IMPF TITLE 47, SECTION 312(a)(RISONMENT (U.S. CODE, TITL 1)), AND/OR FORFEITURE (E 18, SECTIO U.S. CODE, T	N 1001) ITLE 47,
Typed Name of Person Signing		Individual Applicant	. B	
Signature	Date	Officer of Applicant		